

The Adult Provider Network Organization's utilize significant numbers of BHT's and BHPP's to function as case managers and other services (such as peer services) that do not fall under the Board of Behavioral Health Examiners. We depend on supervisors that meet the old standards to deliver the 4 hours of supervision per month. Do the new rules allow for clinical oversight or supervision by a qualified BHT when the services do not fall under the Board of Behavioral Health Examiners?

The clinical oversight by BHPs is for those services requiring a professional license. Personnel members who do other services need to meet the skills and qualifications established by the facility. If the facility wishes to set up two separate processes they can. The system would need to show that patients' needs were being met.

Regarding the seclusion/restraint timeframes, is R9-21-204(H)(4) still applicable – are SMIs still limited to a maximum of three continuous hours of seclusion/restraint without a renewal order? I know the Court ordered a stay of Article 3 of R9-21, but I wasn't sure if that and R9-10-224 voided R9-21-104(H)(4).

3 continuous hours is the maximum for SMI patients, 4 hours for non-SMI patients and be aware that R9-20 is not applicable for any hospital.

I have heard that outpatient clinics that provide counseling only will no longer be licensed is this true?

Yes, the Division will be updating licensure rules to be in alignment with state statutes. Clinics that provide counseling only do not meet the definition in statute as a healthcare institution. The statutory authority for licensure is to license healthcare institutions. Clinics providing counseling will have two options: they can choose to be a private practice and only employee independently licensed professionals which does not necessitate a facility license; or they can add one or all of the following to their license: assistance in self-administration of medication, medication services or physical health services, which would qualify the facility as a healthcare institution and require licensure.

Are Level 4 Transitional Agencies going away?

The subclass of Level 4 will no longer exist in licensure rules. Similar to outpatient clinics providing only counseling, Level 4's that do not provide one or all of the following services will not meet the statutory definition for a healthcare institution; assistance in the self-administration of medication, medication services or personal care services. Level 4's will need to provide one of the services listed above and meet the spatial requirements of a residential facility to remain licensed.

What will happen with licensure regarding facilities that conduct DUI and/or DV services only?

Facilities that provide DUI and/or DV services that are not conducting services that fall under the statutory requirements for a healthcare institutions will submit to the Licensing Division for an Approval

Certificate. This Approval Certificate will allow for the facility to remain on the computerized ADHS list of facilities that provide DUI and/or DV services and will be good for a two year time period. If the facility chooses not to offer the continuum of services that would qualify them as a healthcare institution, then they would not be covered under the Arizona Board of Behavioral Health Examiner's exception statute which allows for BHT's and BHPP's to conduct counseling. To continue to be included in the exception would require the facility to license as a healthcare institution and provide one or all of the services which would meet the statutory definition of a healthcare institution; assistance in self administration of medication, medication services or physical health services. If a facility chooses to be Approved and not licensed, BHT and BHPP's will only be able to perform duties that would not require a professional license, such as, but not limited to, education and case management.

I have branch offices currently listed on my outpatient clinic license, what is happening with branch offices?

Branches where counseling only is provided will need to keep medical records at the licensed outpatient clinic. Staff dispatched for that service will need to be employed under that licensed clinic. Additionally the client(s) receiving the services at a branch will need to have their medical record at the licensed outpatient clinic and be admitted to that clinic. The licensed outpatient clinic will need to conduct the assessments and screening out of the licensed outpatient clinic. Off site, any services which would meet statutory definition of a healthcare institution; assistance in self-administration of medication, medication services or physical health services, which are happening on a regular basis not in the client's home, would require licensure. Branches will no longer be listed on licenses, as outpatient clinics can provide services in the field.

I operate a series of Sober Living Homes, our clients reside in apartments or housing that is part of my program which provides treatment linked to my licensed outpatient clinic. What will be the future of my program?

The residential component will need to be licensed if it is providing any of the following Health-Related Services—Services, other than medical, that pertain to general supervision, protective, preventive and personal care services, supervisory care services or directed care services. [A.R.S. § 36-401(A)(21)] This licensure will require the facility to be in compliance with residential licensing rules including but not limited to spatial requirements.

Will Adult Therapeutic Homes be licensed?

No, Adult Therapeutic Homes will be Approved. An Approval will be good for two years. Adult Therapeutic Homes are intended to be a home not a facility. Adult Therapeutic Homes that provide services that meet the statutory definition of a healthcare institution would require licensure and therefore need to meet all rule requirements for a residential facility. If this is the case, they will no longer be considered an Adult Therapeutic Home.

Will Level 1 Sub-acute facilities have building requirements in the new rules?

Yes, the Licensing Division has developed minimum health and safety architectural requirements to protect clients.

Draft Details to be aware of:

- Outpatient clinics providing both behavioral health and physical health services under the same provider through contract or employment are an integrated facility. Outpatient clinics providing behavioral health and physical health services in the same building but utilizing separate space and under separate providers are co-located.
- All healthcare institution rules will be found in Chapter 10. Approval requirements will remain in Title 9 Chapter 20 (DUI/DV and Adult Therapeutic Homes).
- Universal rules will no longer exist. Each subclass will have a set of rule requirements linked specifically to that subclass.
- Approvals will not have fees associated with them. Only licensed facilities will be charged an application and licensing fee.
- Crisis observation/stabilization units will have a licensed capacity listed on the license in addition to the number of beds the facility has, if applicable.
- Most of the draft rules are currently posted, http://www.azdhs.gov/diro/admin_rules/behavioralhealth.htm Feedback can be sent via Survey Monkey.